

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	Rm		10-11-01
O.I.P.E. CLASSIFIER		43	10/23/01
FORMALITY REVIEW	FR	1018	10/29/01
RESPONSE FORMALITY REVIEW	CK	1109	12-17-01
	CK	571	12-128/01

INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral)..... Canceled  
 ÷ ..... Restricted  
 N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim	Date
Final Original	
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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589  
11/29/01

617  
12-18-01